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APPLICANTS

Ying-Wei Lin, Penfield, NY;
 Stuart A. Schweid, Pittsford, NY;
 Jeng-Nan Shiau, Webster, NY;
 Raja Bala, Webster, NY;
 Zhigang Fan, Webster, NY;

** CONTINUING DATA *****

none

** FOREIGN APPLICATIONS *****

none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 10/23/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 6	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

Verified and Acknowledged

John Chang
Examiner's Signature

Initials

ADDRESS

FAY, SHARPE, FAGAN, MINNICH & McKEE, LLP
 Seventh Floor
 1100 Superior Avenue
 Cleveland, OH 44114-2518

TITLE

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FILING FEE RECEIVED 912	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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